

# ORDER FOR SUPPLIES OR SERVICES

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1. CONTRACT/PURCH ORDER/AGREEMENT NO. <b>SPE4AX-14-D-9415</b>				2. DELIVERY ORDER/CALL NO. <b>SPRTA1-17-F-0092</b>		3. DATE OF ORDER/CALL (YYYYMMDD) <b>17 NOV 2016</b>		4. REQUISITION/PURCH REQUEST NO. <b>FD20301700630</b>		5. PRIORITY <b>DO: A1</b>	
6. ISSUED BY <b>DLA AVIATION AT OKLAHOMA CITY, OK</b> <b>DLR PROCUREMENT OPERATIONS (AO)</b> <b>3001 STAFF DRIVE</b> <b>TINKER AFB OK 73145-3070</b> <b>BUYER: Kevin Howe/DLA-AOAB</b> kevin.howe.1@us.af.mil Phone: (405) 734- 8108 No Collect Calls				CODE <b>SPRTA1</b>		7. ADMINISTERED BY (If other than 6) <b>DCMA PROP OPS - ROLLS ROYCE</b> <b>ATTN SPEED CODE S31B</b> <b>2001 S TIBBS AVE</b> <b>INDIANAPOLIS IN 46241-4812</b> <b>(317)230-4240</b>				CODE <b>S1504A</b>	
9. CONTRACTOR <b>ROLLS-ROYCE CORPORATION</b> <b>ROLLS-ROYCE CORPORATION</b> <b>450 S MERIDIAN ST</b> <b>INDIANAPOLIS IN 46225-1103</b> <b>UNITED STATES</b> <b>(317) 230-2000</b> <b>Attn: DLA SOLICITATIONS</b> <b>Email Address: defensequotes@rolls-royce.com</b>				CODE <b>63005</b>		FACILITY		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <b>SEE SCHEDULE</b>		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
								12. DISCOUNT TERMS <b>NET 30 DAYS</b>		11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISAD-VANTAGED <input type="checkbox"/> WOMEN-OWNED	
								13. MAIL INVOICES TO <b>SEE BLK 15</b>			
14. SHIP TO  <b>SEE LINE ITEM SCHEDULE</b>				CODE		15. PAYMENT WILL BE MADE BY (SEE ESP CLAUSE 252.232-7003.) <b>DFAS COLUMBUS CENTER</b> <b>NORTH ENTITLEMENT OPERATIONS</b> <b>P O BOX 182266</b> <b>COLUMBUS OH 43218-2266</b> <b>(800)756-4571</b>				CODE <b>HQ0337</b>	
										MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. TYPE OF ORDER		DELIVERY/ CALL		<input checked="" type="checkbox"/>		This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.					
		PURCHASE				Reference your ____ Dated: ____ furnish the following terms specified herein.					
<b>ACCEPTANCE.</b> THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.											
NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYYYMMDD) _____ If this box is marked, supplier must sign Acceptance and return the following number of copies: _____											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <b>SEE SCHEDULE</b>											
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICES <b>(SEE SCHEDULE)</b>				20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT
SAME AS CLIN 0210 OF BASIC CONTRACT  EARLY AND PARTIAL SHIPMENTS ARE ACCEPTABLE  PACKAGING IAW BASIC CONTRACT //Electronically Signed//											
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA BY: <b>Lyndsey Shirazi</b>  CONTRACTING/ORDERING OFFICER <b>17 -NOV -2016</b>				25. \$ <b>520,433.92</b>			
								26. DIFFERENCES			
27a. QUANTITY IN COLUMN 20 HAS BEEN: <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED:											
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE			
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE						28. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. D.O. VOUCHER NO.		30. INITIALS	
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS				31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR	
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.										34. CHECK NUMBER	
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CONTRACTING OFFICER								35. BILL OF LADING NO.	
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	

SUPPLIES OR SERVICES AND PRICES/COSTS

New Manufactured Material

**Item No.**

0210

Firm Fixed Price

<u>Quantity</u>	<u>U/I</u>	<u>Unit Price</u>	<u>Amount</u>
64	EA	\$8,131.7800	\$520,433.92

<u>CLIN</u>	<u>ACRN</u>	<u>ACRN Total</u>
0210	AA	\$520,433.92

**NSN:** 2840-01-525-9303 OJ  
SUPPORT,BEARING,AIR

<u>Manufacturer</u>	<u>Part Number</u>
63005	23071468

<u>Associated Document(s)</u>	<u>Line Item(s)</u>
F3YCAB6294B012	

FD20301700630	0001
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**Priority:** R

**Limitations of Liability:** Other Than High Value Item

**Preliminary Inspection:** 63005

**Final Inspection:** Origin

**Address Code:** 22819

**Acceptance:** Origin

**Inspection/Acceptance Report:** Receiving Report Required

**Quality Assurance:** IAW Basic Contract

Buy American Act/Balance of Payments Program

**IUID Required:** Yes

**Physical Item Markings:**

☐ **Transportation From Continental United States CONUS (CONUS) Sources**

<u>TYPE / SHIP TO CODE</u>	<u>F.O.B.</u>
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<u>Type / Ship To</u>	<u>ORIGIN</u>	<u>Mark For</u>
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09
A SW3211	PAA	ACCT 09

<b>Required Delivery</b>	<u>Type / Ship To</u>	<u>Quantity (U/I)</u>	<u>On or Before</u>	<u>Req No / Pri</u>
	A SW3211	6 EA	1 MAR 2017	
	A SW3211	6 EA	3 APR 2017	
	A SW3211	6 EA	1 MAY 2017	

**New Manufactured Material**

A SW3211	6 EA	1 JUN 2017
A SW3211	6 EA	3 JUL 2017
A SW3211	6 EA	1 AUG 2017
A SW3211	6 EA	1 SEP 2017
A SW3211	6 EA	2 OCT 2017
A SW3211	6 EA	1 NOV 2017
A SW3211	6 EA	1 DEC 2017
A SW3211	4 EA	1 JAN 2018

**SHIP TO / PLACE OF PERFORMANCE**

**TYPE/CODE:** A SW3211  
DLA DISTRIBUTION DEPOT OKLAHOMA  
3301 F AVE CEN REC BLDG 506 DR 22  
3301 F AVE CEN REC BLDG 506 DR 22  
TINKER AFB OK 73145-8000  
TINKER AFB OK 73145-8000  
USA

**MARK FOR:** (See Individual Line Item)  
**REQUISITION NUMBER:** (See Individual Line Item)  
**REQUISITION PRIORITY:** (See Individual Line Item)  
**AWARD NUMBER:** SPRTA1-17-F-0092  
**BASIC CONTRACT NUMBER:** SPE4AX-14-D-9415

**CONTRACT CLAUSES**

**ACCOUNTING AND APPROPRIATION DATA (AUG 1998)**

Accounting and Appropriation Chargeable		Amount Chargeable
ACRN	Funds Citation	
<b>AA</b> 97 X4930 .FC04 64 7 47 GT 15400E 01N000 00000 000000 503000 F03000 PSR: K11491 FSR: 013352 DSR: 276355		\$520,433.92
REFERENCE:		
<b>AA</b> SDN: F3YCAB6294B012		
<b>ACRN TOTAL</b>		<b>\$ 520,433.92</b>

Preliminary inspection and acceptance will be at:

**Item No(s):** See schedule for items that specify preliminary inspection.

**Inspection Code and Address:**

63005  
ROLLS-ROYCE CORPORATION  
ROLLS-ROYCE CORPORATION  
450 S MERIDIAN ST  
INDIANAPOLIS, IN 46225-1103

ROLLS-ROYCE CORPORATION

Government Contract Quality Assurance Inspection and Acceptance will be at (Final):

**Item No(s):** See schedule for items with the following code(s) listed below :

**Inspection Code and Address:**

22819  
AVIALL SERVICES, INC.  
2750 REGENT BLVD  
DFW AIRPORT, TX 75261  
<https://www.aviall.com/>

**F.O.B. ORIGIN (OCT 1993)**  
(IAW FAR 47.305(b))

Any supply item applicable to this document shall be delivered F.O.B. at:

**F.O.B. Address**

22819  
AVIALL SERVICES, INC.  
2750 REGENT BLVD  
DFW AIRPORT, TX 75261

